

## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### APPARATUS AND METHOD FOR ABLATING TISSUE

the specification of which is attached herewith.

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application(s) for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

#### Prior Foreign Application(s)

<u>Application No.</u>	<u>Country</u>	<u>Date of Filing</u>	<u>Priority Claimed Under 35 USC 119</u>
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I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

<u>Application No.</u>	<u>Filing Date</u>	<u>Status</u>
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I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<u>Application Serial No.</u>	<u>Date of Filing</u>	<u>Status</u>
09/356,476	07/19/99	Pending
09/157,824	09/21/98	Pending
08/943,683	10/15/97	Pending
08/735,036	10/22/96	Abandoned

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

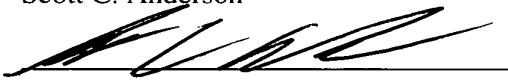
Jens E. Hoekendijk, Reg. No. 37,149

Send Correspondence to:	Direct Telephone Calls to:
Jens E. Hoekendijk 265 San Anselmo Avenue San Francisco, CA 94127	Jens E. Hoekendijk Reg. No. 37,149 Telephone: (415) 753-3516

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or one joint inventor:

Scott C. Anderson



2/11/00

Inventor's signature:

Date:

Residence & Post Office Address:

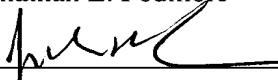
548 Cashmere Court  
Sunnyvale, CA 94087

Citizenship:

United States

Full name of sole or one joint inventor:

Jonathan L. Podmore



2/11/00

Inventor's signature:

Date:

Residence & Post Office Address:

444 15<sup>th</sup> Avenue #307  
San Francisco, CA 94118

Citizenship:

United States

Full name of sole or one joint inventor:

Roxanne L. Richman



2-11-00

Inventor's signature:

Date:

Residence & Post Office Address:

588 Vasona Avenue #A  
Los Gatos, CA 95032

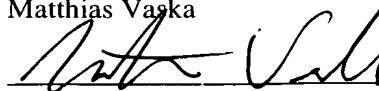
Citizenship:

United States

Full name of sole or one joint inventor:

Matthias Vaska

Inventor's signature:



2/11/00

Date:  
Residence & Post Office Address:

805 Colorado Avenue  
Palo Alto, CA 94303

Citizenship:

United States

Full name of sole or one joint inventor:

David A. Gallup

Inventor's signature:



2/14/00

Date:  
Residence & Post Office Address:

2720 Tribune Avenue  
Hayward, CA 94542

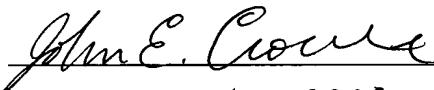
Citizenship:

United States

Full name of sole or one joint inventor:

John E. Crowe

Inventor's signature:



11 Feb. 2000

Date:  
Residence & Post Office Address:

1601 Mariposa Blvd.  
Palo Alto, CA 94306

Citizenship:

United States

Full name of sole or one joint inventor:

Jack E. Ulstad, Jr.

Inventor's signature:



2-11-00

Date:  
Residence & Post Office Address:

14945 Two Bar Road  
Boulder Creek, CA 95006

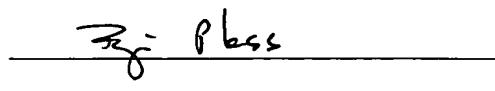
Citizenship:

United States

Full name of sole or one joint inventor:

Benjamin Pless

Inventor's signature:



2-15-2000

Date:  
Residence & Post Office Address:

5 Ridgeview Drive  
Atherton, CA 94027

Citizenship:

United States

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.9(f) & 1.27(c))- SMALL BUSINESS CONCERN**

Applicant or Patentee: **Scott C. Anderson, Jonathan L. Podmore, Roxanne L. Richman, Matthias Vaska, David A. Gallup, John E. Crowe, Jack E. Ulstad, Jr., and Benjamin Pless**

Application No.: **Unassigned**

Filed Or Issued: **Herewith**

Title: **APPARATUS AND METHOD FOR ABLATING TISSUE**

I hereby declare that I am an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN: **EPICOR, INC.**

ADDRESS OF SMALL BUSINESS CONCERN: **173 Jefferson Drive  
Menlo Park, CA 94025**

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled: **APPARATUS AND METHOD FOR ABLATING TISSUE** by inventors **Scott C. Anderson, Jonathan L. Podmore, Roxanne L. Richman, Matthias Vaska, David A. Gallup, John E. Crowe, Jack E. Ulstad, Jr., and Benjamin Pless**, described in the specification filed herewith.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING:

**Matthias Vaska**

TITLE OF PERSON IF OTHER THAN OWNER:

**V.P. of Research**

ADDRESS OF PERSON SIGNING:

**173 Jefferson Drive  
Menlo Park, CA 94025**

Date: 2/17/00

Signature: 

## POWER OF ATTORNEY BY ASSIGNEE

**EPICOR, INC.**, a Delaware corporation, located at 173 Jefferson Drive, Menlo Park, California 94025, is the Assignee of the invention entitled: **APPARATUS AND METHOD FOR ABLATING TISSUE**, the specification of which is filed herewith

The Assignment accompanying this Power of Attorney has been reviewed by the undersigned. The undersigned certifies that to the best of the undersigned's knowledge and belief, title is in the Assignee.

Assignee hereby appoints the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Jens E. Hoekendijk, Reg. No. 37,149

Send Correspondence to: Jens E. Hoekendijk 265 San Anselmo Avenue San Francisco, CA 94127 Telephone: 415-753-3516	Direct Telephone Calls to: Jens E. Hoekendijk Reg. No. 37,149 Telephone: (415) 753-3516
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**EPICOR, INC.**

Date: 2/17/00

By: *Matthias Vaska*  
Matthias Vaska  
V.P. of Research